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appropriate All further cor	respondence including the legion or directed otherwise	Patent advance ord	ders and notific:	ation of maintenance fees v	ired). Blocks I through 5 s vill be mailed to the current and/or (b) indicating a sepa	correspondence address as	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)  5514  7590  10/22/2004				papers. Each additiona	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
FITZPATRICK CELLA HARPER & SCINTO  30 ROCKEFELLER PLAZA NEW YORK, NY 10112  1/06/2005 HLE444 00000169 10639589  1 FC:1501 1400.00 OP 2 FC:1504 300.00 OP 300				Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.			
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APPLICATION NO.	FILING DATE	FIRST NAMED INV		NVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/639,589	08/13/2003	Kenji Suzuk		zuki	03500.013766.1	7700	
TITLE OF INVENTION: P	ROCESS AND APPARATU	IS FOR FORMING	SIMAGES		,		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1370		\$300	\$1670	01/24/2005	
EXAMINER AI			T	CLASS-SUBCLASS			
YAN, REN LUO		2854	2854 347-212000		•		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  FITZPATRICK, CELLA,  HARPER & SCINTO				
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	HE PATENT (1	print or type)			
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion	elow, no assignee of this form is NOT	data will appear \( a substitute for	r on the patent. If an assigr r filing an assignment.	nee is identified below, the o	locument has been filed for	
(A) NAME OF ASSIGN	EE	(B)	3) RESIDENCE: (CITY and STATE OR COUNTRY)				
CANON KABUSHIKI KAISHA Tokyo, Japan							
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4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):  ✓ A check in the amount of the fee(s) is enclosed.							
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a. Applicant claims S	(from status indicated above MALL ENTITY status. See	37 CFR 1.27.			LL ENTITY status. See 37 C		
The Director of the USPTO NOTE: The Issue Fee and P interest as shown by the reco	is requested to apply the Issue the Issue the Issue the Issue that is the Issue that Issue the Issue that Issue the Issue Issu	ue Fee and Publicat will not be accepted ent and Trademark	tion Fee (if any) I from anyone o Office.	or to re-apply any previous other than the applicant; a reg	ly paid issue fee to the applic istered attorney or agent; or t	ation identified above. he assignee or other party in	
Authorized Signature Authorized Signature			January 5, 2005				
Typed or printed name _	Justin J. 01	liver	Registration No. 44,986				
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